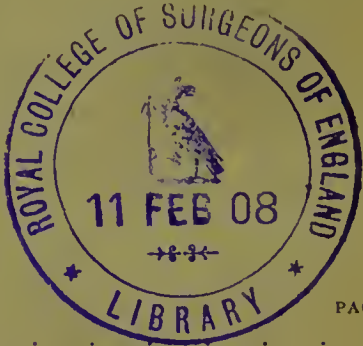


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PROCEEDINGS

OF THE

SOCIETY FOR THE STUDY OF INEBRIETY.



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STUDY OF INEBRIETY.

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PROCEEDINGS
OF THE
SOCIETY FOR THE STUDY OF INEBRIETY.



This Society will not be responsible for the opinions and statements of any contributor to this Journal, unless these have been endorsed by the Council.

11 CHANDOS STREET, CAVENDISH SQUARE,
LONDON, W.

The Quarterly General Meeting was held on Tuesday, October 9, 1900. The President, Dr. Wynn Westcott in the chair.

A letter from Mr. Loch, the Secretary of the Charity Organization Society was read, inviting the members of this Society to a Meeting to be held at the Royal United Service Institution, on the question of Inebriety among women.

The President then stated that the Committee on Heredity had held fourteen meetings which had been well attended. That very important discussions had taken place upon many points relating to the subject; but that the result showed a distinct tendency to a divergence of views upon Heredity. One view was that alcoholic personal inebriety was a constant source of drink craving in the progeny; while the other opinion was, that an acquired personal inebriety was physiologically incompetent to develop, by hereditary taint, into an inebriate tendency; for it had not yet been proved that any somatic acquirement was hereditary. Many members seem disposed to grant that alcoholic intemperance in the parent tended to lower the vitality of the offspring, and to render it liable to physical, mental, and moral degeneration.

An appeal had been made to the medical profession and the public for evidence on the question of the Heredity of Alcoholic Inebriety, and had been published in *The Lancet* and *British Medical Journal*, and copied into more than thirty public prints, but had failed to bring more than thirteen answers, the most of which were from untrained individuals who recited only their personal experience or inclination; not one single answer had been received from a medical practitioner.

The Heredity Committee had decided to postpone its report, and to continue its investigations during the present session.

Dr. Longhurst's name was added to the list of those on the committee, and as far as possible the meetings will be held every alternate Friday, beginning on Friday, October 19, to receive further evidence bearing on the subject and to draw up a report.

On July 26, the President read a paper before the Medico-Psychological Association upon "Inebriety: its causes and cure." An abstract of which appears in the issue of the *Journal of Mental Science* for September, together with notes of the discussion thereon.

INEBRIETY: A CRIME OR A DISEASE?

By SURGEON-MAJOR POOLE, M.D.

It has been said, and is thought by many, that most confirmed drunkards inherit a condition analogous to disease, or acquire that condition from circumstances over which they have no control; in fact, that Inebriety is a disease, and is to be treated as such. We often hear it said that "such and such a person is a drunkard, but then, poor soul, he could not help it, for his father or mother was one before him."

Frequent discussions upon the subject of my paper have taken

place in the Society for the Study of Inebriety, and this I purpose to open again. Happily, however, such discussions have I think, led to a considerable change in the treatment of drunkards, and legislation is directed rather to provide for, than to punish them. Though it may be fairly questioned whether inebriety is not quite as much a sin as a disease for which special treatment is required, yet treatment must be based upon the discovery as to the origin of the evil before we can expect a cure.

I do not intend, however, this afternoon to trespass very long upon your time, or to touch upon the somewhat vexed question of heredity, or upon what is involved in the term. That part of the subject has been very properly referred to a Committee of our Society, a report of whose work will shortly be in your hands. The investigation is a long, patient, and scientific one, not to be quickly hurried over, and it is a difficult one, not—as a cursory observer might consider at first sight—easily got over, because many drunkards are the offspring of drunken parents. But the Society wishes to discover if this is really a fact, and the why and wherefore of it. So I leave that with the special committee, and simply by my few remarks venture to hope that that part of the subject will be left alone, and discussion confined to the criminality or diseased condition of the drunkard generally.

There is no doubt but that for many years drunkenness has been looked upon either as a crime, or as something out of which a good deal of fun may be had, and it has been either punished, or treated as a joke. And I very much fear this idea is still very prevalent, and I think we may say, it remained for our late president—and that only comparatively recently—to shew it in another light, and to throw the bright beams of scientific thought upon what had hitherto been in darkness, and by means of the light of religion and science (never at variance and intimately connected, if men will have it so) to bring these, the two best sides of our human nature to bear upon a hitherto unsolved problem, and to teach us a not altogether new, but an

unsealed doctrine—the doctrine of inebriety as a disease. This was his work, all honour to him for it!

But in order to show that drunkenness was looked upon as a crime, Dr. W. L. Brown, a member of the Educational Institute of Scotland, gave an account the year before last—in 1898—of the various kinds of punishment to which habitual drunkards were formerly subjected. For they were looked upon as worthless and degraded beings, if they belonged to the lower classes, but as heroes if they were of the upper ranks of society—as two-bottle or three-bottle men. At any rate, Dr. Brown told us that it was formerly the aim of some of the doctors who devoted their energies to the study of the drink question, rather to produce such a condition of body that a man fond of drink could indulge in his favourite pastime without doing himself harm; rendering him immune, as he called it, from the effect of constant alcoholic tipping. He then proceeded to enumerate the different fines and penalties to which drunkards were subjected; large doses of nauseous drugs being administered, or filthy concoctions given, partly as a punishment for a debauch and partly as a probable deterrent in the future, but tending to produce the so-called immunity, or to enable a man to take his “whack” without feeling it. We were further told that the habitual drunkard was excommunicated by the priest (a much more serious matter then than it is now), indignities of all kinds were heaped upon him, he was safely lodged in the stocks, heavily fined and imprisoned, refused decent burial, and a still more prohibitive measure of indignity to his corpse was sanctioned by the reformed clergy of 1610, as we read that a certain Edward Reeve, full of strong liquor, fell from his horse and was killed, his body being placed on a fire and burnt next day—cremation in that age being considered an indignity. All this has occurred in the past, and much of it is going on in the present, for drunkenness has been looked upon as a crime for which there was no relief but punishment of the prison or otherwise. Even now, drunkards are persons to be shunned, their condition is ill understood, and they

are sentenced time after time to the gaol. Religious people, too, working from the best of motives, begin at the wrong end; induce them to take a pledge they never intend to abide by, and in this way they lower the moral and religious tone of the person of the nature of whose individual case they are ignorant.

At the same time, however, it is difficult to divest one's mind of the idea that there must be a criminality in drunkenness—for, what is crime? The dictionary defines it to be “an act which violates a law or rule of right, divine or human, which subjects its agents to judgment, it is a violation of public law of a deep and atrocious nature, any great wickedness, a great fault, a heavy offence.” Now, there can be no doubt that drunkenness, even if not habitual, does violate both the Divine and human law, for the book of the Divine law—that is, the Bible—if it tells us no more than this, tells us that neither fornicators, idolators, nor drunkards, shall inherit the Kingdom of God (that is if they continue in this condition and die in it) (1 Cor. vi. 10); and, further, the works of the flesh are these, drunkenness, &c., and they who practise such things shall not inherit the Kingdom of God. So here is a breach of the Divine law. Again, human law forbids disorder, rioting, violence, and calls such things criminal, and exacts punishment from the author of such acts; and it must be allowed that drunkenness, being the cause of acts like these, is the criminal act itself, upon which a man or woman enters of his or her free will, putting aside the question of heredity altogether. But it may be said that habitual drunkenness differs from the drunkenness that produces violence and disorder, for the habitual drunkard is very often a quiet, inoffensive individual, the enemy of himself alone. This may be very true, but it is only a difference in degree; for a sin or a crime that is frequently given way to becomes habitual. Even a murderer, though he may not actually commit the crime of murder, becomes to a certain extent a habitual murderer if he is constantly planning the destruction of someone he hates, until he meets an opportunity of carrying out his diabolical purpose. Or an adulterer who permits his mind

to wander unrestrained after unholy desires so accustoms himself to the sin that it becomes habitual to him—he is only waiting an opportunity to gratify himself, and so becomes a habitual fornicator or adulterer.

The will-power to resist evil of any kind may be weakened from habitual self-indulgence, but it is not altogether deficient or altogether dead, and to the drunkard there comes an intense desire, a love of his self-indulgence, a determination to get drink at whatever cost, and so law and order is violated—willingly, perhaps thoughtlessly, but surely, hence criminally, because he knows what the result of drinking is; and such an act becomes as much a crime as picking a pocket or breaking into a house; even though stealing may be called kleptomania; murder, culpable homicide; or drunkenness, narcomania. And to treat everyone guilty of these acts as weak-kneed individuals is to show them a true sympathetic pity which is certainly undeserved.

But, at the same time, I would not have it thought that for a moment I consider drunkenness a criminal offence only, and that it is a vice that can easily be mastered. The failure of punishment, pains, and penalties to prevent excessive drinking points to something beyond criminality, and by their very failures such penalties seem to have rather increased the mischief, in the same way that beating a idiot, or dealing harshly with a lunatic, or putting a strait-jacket on a violent maniac would increase his violence, though for a moment it might restrain him. There would be no curative result, and on the return of the violent maniac to sanity, he would tell us of the agony he suffered under this severe restraint, and how it intensified his misery. Punishment of every kind has failed to cure habitual drunkenness, as it has failed in many cases to cure thieving, or pocket-picking, or any other breach of the law; for it is very seldom that a thief or pickpocket or a drunkard is in any way improved by a tour of gaol life. He returns to his home, finds it empty, swept, and garnished; “then goeth he, and taketh with himself seven other spirits more wicked than

himself, and they enter in and dwell there, and the last state of that man is worse than the first."

But I must not take up your time, but simply say that in very many instances drunkenness is a disease; this diseased condition having been produced through the criminality of indulgence in drink. Personally, I do not consider that this diseased condition exists, *per se*, in any one unless it has been acquired. I am not prepared, as I said before, to speak of the taint of heredity—leave that alone for the present; but of this I feel certain, that alcohol in any form in any great quantity tends to produce a condition which we call alcoholism, the potent agent taking such a hold upon individuals that it asserts itself, becomes dominant, irrepressible, and, unless such individuals are put under medical or social treatment, they become incurable.

Norman Kerr's and other books on inebriety are full of details of cases of men, women, and even children, in whom this condition has acquired such a power that it has been termed narcomania, or the disease inebriety. But what is the history? A good start in life has been made, and the child, healthy at birth, brought up in an unhealthy, overcrowded home, pressed hard at school, with a precocious disposition, active in mind and body, runs up like a greenhouse plant into a cellular, almost boneless creature, for the bones are rickety, and being so, break down; is taken to a hospital or put under medical treatment, and advised to have a little port-wine, "for the stomach's sake," instead of being patiently treated with good food. Or the mother with a rapidly increasing family, perhaps suckling her fourth or fifth child in the sixth year of her married life, is advised—possibly by the doctor who has landed her safely through her recent confinement—to take a little "stout," and soon she damages herself by carelessly going from stout to wine, and wine to spirits, and contracts the drink disease. The same with the husband; anxiety in business, or what not, causes him also to acquire a disease that he never dreamt of on his wedding day. There may be a little, the very slightest, deficiency in nerve-

power, which would never have developed into disease unless a commencement had thus been made ; for we know of many who are defective in mental power who have never fallen, though they may have suffered trials in life like other people, but have never touched alcohol, and are no more likely to become inebriates than we are. But in those who take to drinking there is a lurking love (coupled with a want of self-control) for something they do not possess, and which they imagine alcohol will supply ; they like it, it gives spurious courage, increased flow of thought and language, freedom from anxiety and pain for the time being, exhilaration to the depressed, and so, regardless of what science teaches, they take to it.

In considering, then, inebriety as a disease, we once more resort to the dictionary for the meaning of the word "disease." It is "want of ease, any state of the living body in which the natural functions of the organs are disturbed ; corrupt state of morals, mental or civil disorder." From this it is quite evident that inebriety holds a place as a disease. It does produce illness, it does upset the natural functions, it does produce disorder ; stimulates at first, then soothes, depresses, often to a dangerous extent—even to coma—and then destroys. The moral system is upset, mental defect and irritation supervene, and the first nail is put in the coffin. It is quite true, and it is well known, that persons may make use of alcohol for years without its giving rise to disease ; may live to a good old age ; and even heavy drinkers have been known to live the allotted time of man, and apparently enjoy good health, but, at the same time, always on the verge of doubtful health which a sudden change of habit or accident may upset, and what is called the drink crave be induced. But it is a disease-producer, and one would like to know to what age those octogenarians would have lived if they had never touched it.

The annual report of the Dalrymple Certified Home for Inebriates at Rickmansworth points to inebriety as a crime as well as a disease in the following manner :—Out of 561 cases

treated since the establishment was opened in 1883, about 372 were traceable to habits of sociability leading to excess, idleness, tipping at intervals, work in public-houses, and so on, and about 189 to nervous shock, ill-health, overwork, injuries from accident, &c. ; more than half of those admitted were admitted from causes over which they certainly had some control, and may fairly be classified among those who have "violated a law or rule of right Divine and human," guilty of a grave fault or heavy offence ; while the rest may be placed among those who are "ill at ease, in such a state that the natural functions of the organs of the living body are disturbed," &c. ; clerks, merchants, and men of no occupation swelling the ranks of those in the former category, who, it might reasonably be expected, would be in good health, drinking only from the love of the thing, and becoming criminal inebriates though they knew the evil and did not avoid it.

Even Norman Kerr, who was so strongly of opinion that inebriety was a disease, says in his able work on narcomania, "Drunkenness is at once a moral and physical evil" ; by which I take him to mean it is a crime as well as a disease, and with this I entirely agree. It is both ; the will of the inebriate has been destroyed or weakened by want of exercise in the virtue of self-control, he has fallen into sin, weakened his physical nature, and the result has been disease—disease only to be cured by an insight into his own condition, a recognition of its cause, and a going back to his pure state previous to his fall. This is the only way to effect a lasting cure ; first of all, an entire withholding of that which is keeping up the two conditions of sin and disease which are often present in the same individual ; the use of alcohol in every form, even as a medicine, must be stopped at once and for ever ; the will power must be strengthened under proper conditions ; the bodily health improved, and, if disease has not advanced too far, there is no reason to suppose but that there will be a perfect cure. One great factor in the attainment of so desirable an end will be the factor of social influence, the keeping company with those who

never touch alcohol. Influence is a gift we all possess, coming as it does direct from God through the voice of conscience ; it is mysterious, unseen, and, used aright, noble and invigorating. Here, it is magnificent in its effect, whether it be distributed by books, by the splendid agency of the press, by conversation, or by example. Numbers have been led aright by these means. What a noble chance for each of us ! The use of remedies is another factor in the means to be used, as simple as can be—drugs as tonics or to supply the place of alcohol only.

From all this it appears to me that the endeavour to treat inebriety as a disease only (which it is not), and without recognising it as a crime, is a difficult matter ; the two conditions are tightly interwoven, and as soon as this is recognised, our work—both legislative and religious—will be much lightened ; for to shut up an inebriate in a home, however necessary it may be in some cases, keeping from him that which he has loved better than life itself, supplying him with amusement, medical treatment, social intercourse with his fellows, mental gratification, and all the pleasures that are possible in his comparatively isolated condition, without pointing out to him the dangerous state he is in as one who has erred against his God, his neighbour, his country, his family, and himself, is only one small advance on the ladder towards his cure. In this way, and in this way only, is inebriety curable ; the charming grounds, pleasant view, spacious hall and kitchen, the luxurious billiard room, the regulated life, the model of equipment, must fail unless there is the co-operation of the unfortunate, the knowledge of self, the feeling of hope built upon religion, the clearing away of the cobwebs from the seared and blurred conscience, and the earnest, prayerful desire for better things. This is the plan which will bring real success ; without these means there will be nothing real, nothing lasting, nothing true towards the cure of the inebriate.

DISCUSSION.

Dr. Wynn Westcott said :—The lecturer of to-day, Surgeon-Major Poole, M.D., is the oldest member of our Inebriety Society, and has attended a large number of its meetings and so is quite familiar with the general tendency of the views of its members. You have to-day heard Dr. Poole explain his own views of the matter in question—whether inebriety should be recognised as a crime or as a disease. The Founder of our Society, Dr. Norman Kerr, was among the first to proclaim inebriety a disease, and our members have always been much biassed by his opinion. But we must remember that there is a large mass of professional and of public opinion which still asserts that most of our present inebriety is vice, if not crime, and that inebriety is self-indulgence rather than an expression of mental and physical inability to maintain a propriety of life.

There is still much to be said on both sides of the question : perhaps neither view should exclude the other : *in medio tutissimus ibis* is a sentiment as true as it is old.

A man with strong hereditary predisposition can hardly escape from developing inebriety, unless his circumstances are specially desirable.

A man who is free from hereditary taint does not fall unless his surroundings are very bad, and in this respect the surroundings of childhood and youth are equally fatal, if bad, as is the environment of adult life.

The Medico-Psychological Association by its members differs from our Society, I think, by tending more to consider inebriety as a vice due to love of self-indulgence. The members of that Society are entirely concerned with the insane, and they know how large a proportion of the insane have become so from alcoholic excess. Now insanity is even more frequently hereditary than alcoholism, and the contrast between insanity due to

alcoholism and insanity from other causes is a subject of great interest to us. There is also a definite relation between crime and insanity, as well as between crime and alcoholism, and these relations also concern us as students of inebriety in general, its cause and cure.

Drinking to excess to stimulate the courage for evil deeds is crime. Excess of drink may be criminal if indulged in, when the man knows he loses moral control by use of alcohol.

But alcoholic excess arising from an intolerable physical craving, or alcoholic excess used as a remedy for soul-tearing trouble due to nervous and mental weakness is disease, and medical treatment and pity may cure this sufferer, while punishment would be a cruelty and a failure.

Dr. Paramore thought that drinking as a vice, led to drinking as a disease. Some moderate drinkers took so little as to be practically abstainers, but all those who were not total abstainers were on the road to destruction. The simple treatment was to keep out of danger, as alcohol was a delusion and a snare.

Dr. Longhurst looked upon inebriety as both a crime and a disease. Long indulgence caused the disease—bodily and mentally—and children of intemperate parents inherited an enfeebled nerve-system which rendered them more liable to inebriety.

Dr. Heywood Smith said :—It is difficult to persuade people that drunkenness *per se* is a crime, although it leads to criminal acts. Whether it is considered a crime or not it produces loss of nerve control. To the intelligent who realize this it constitutes drinking a crime, and the persistent crime of drinking constitutes the disease.

There are homes for the treatment of the inebriate criminal, but we have not sufficient power to deal with non-criminal cases. It is very difficult to get drunkards to abstain, and we need the same power to deal with them as with other lunatics, without having to wait until they become criminals.

Dr. Kesteven looked upon inebriety as a symptom of disease,

and upon a human being as healthy only when he possessed a *mens sana in corpore sano*. The origin of inebriety was the want of some quality in the mind of the individual, especially self-control. If an individual was of unsound mind it was a debateable question as to whether he should be treated, with regard to inebriety, as a criminal, or as a lunatic.

Mr. Riley stated that he was brought up to consider wine necessary. He was not influenced by temperance oratory, but had heard of medical men who were advocates of total abstinence, so tried it for six months, and then for twelve months, and so came to the conclusion that it was the right thing, and his views are now entirely different to those of moderate drinkers.

Surgeon-Major Poole in his reply expressed the opinion that Englishmen did not, as a rule, like to press the higher motive for sobriety lest they should be accused of cant.

A vote of thanks was accorded to Dr. Poole for his interesting and instructive paper.

A REPORT ON THE INEBRIATES ACT, 1898.

This Act has been in force nearly two years, but it cannot be said that very great results have yet been achieved. The Home Secretary declined to build a State reformatory for the nation, or any part of it; he also declined to set aside any special prison for the purpose.

The boroughs and county councils, fearing the original outlay and subsequent expenses, have in many cases declined to undertake the work, alleging that the foundation of such reformatories is a national duty.

In many other cases councils are still conferring with neighbouring councils as to a joint establishment.

In still other cases boroughs and councils have made arrangements with privately owned licensed houses to admit inebriates from their districts. The home at Brentry, near Bristol, has

made arrangements with twenty-two local authorities, borough, and county councils, to receive and treat both male and female cases. Lady Somerset's Home at Duxhurst, near Reigate, has also taken many cases of female inebriates. St. Joseph's Reformatory for Roman Catholics at Ashford is well supplied with patients. Lancashire has obtained a special Act of Parliament to create an Inebriates Board representing twenty-five boroughs, in addition to the County Council.

In all, four institutions for female inebriates, and one for males, have been licensed under these Acts; while two other reformatories for men, and one for women, are expected to receive certificates at an early date.

During the first year's working of the new Act, only eighty-two patients were received, five under Section 1, upon conviction for an offence punishable by imprisonment or penal servitude; and seventy-two under Section 2, on a new conviction, after three previous convictions within a year, of an habitual drunkard. Of these, London has supplied sixty-one cases.

By many persons it is considered that still further legislation is necessary, on the one hand, for the confinement of the wealthy drunkard, and on the other hand, for the gratuitous care of the poor inebriate. Possibly, also, an extension of the meaning of the word "inebriate" to include other forms of drug intoxication, such as morphinism, would be advantageous.

The London County Council has a Special Committee to deal with all matters relating to the Inebriates Act. It also made temporary arrangements with existing institutions for the care of its inebriates. The Council has also purchased a large estate of 364 acres at Charlwood, near Horley, Surrey, and has modified some existing buildings there to serve as a reformatory for the restraint and treatment of the female cases, which are committed from the judicial courts within the area of its control, the present sixty-one certified drunkards do not form even a small proportion of the offenders who are also habitual drunkards in London. This institution was opened in August of this year.

There may be delay, and there will doubtless be many diffi-

culties to be surmounted before the County of London will be fully supplied with all the desirable accommodation for inebriates, but that the arrangements made will be well considered and skilfully executed, under the guidance of the present chairman of the Inebriates Committee, Dr. Job Collins, no one who has long known that councillor can have any doubt.

Inebriate reformatories may, in the future, well be of various characters, some for the criminal, some for the misdemeanant, and others for the treatment of the sick inebriate, and the semi-insane dipsomaniac.

It will be difficult also to combine under one roof suitable treatment for rich and poor sufferers.

In all cases we think the superintendent of the institution should be a physician and not a civilian, and he should be a doctor who has an enthusiasm for the work of curing inebriety. He should be an abstainer, and so should all his officers. The home should be in the country as far as possible from towns, to avoid the risks of drinking by the straying away of patients, and so as to provide ample agricultural and gardening work. Regular and suitable labour, and regular but varied amusements should be provided. The system of preserving good order by the bestowal of rewards is to be preferred to that of punishment for errors. The culture of the patients by a well considered moral code will be a necessary feature of the successful mode of cure.

The separation of the sexes will be necessary, but there might well be two adjacent homes, one for each sex, by which means the agricultural work of one might supplement the laundry and clothing work of the other. Small dormitories should be preferred to large wards. The mental and moral standing of the nurses and attendants should be a matter of careful selection. Lastly, these homes should be self-supporting colonies, devoted to self-improvement by means of pure air, exercise, regular work, sufficient play, good food, and healthy dwellings.

Placed under these conditions, the chronic drunkard may

soon regain health, and lay a basis for future good conduct. The difficult cases will be those of patients who remain reasonable for long periods, but who occasionally break out into maniacal drink craving and violence; such cases are to be controlled by drugs.

WYNN WESTCOTT, M.B.

FUTURE MEETING.

The next Quarterly Meeting will be held in the Rooms of the Medical Society of London, 11 Chandos Street, Cavendish Square, W., on Tuesday, January 8, 1901, at 4 p.m., when a lecture will be given by Dr. Longhurst. Subject:—"Moderate Drinking, can it Injure the Health?"

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